1101848

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTIO

SEC USE ONLY

Prefix | Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)						
Series F Convertible Preferred Stock						
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☐ Rule 506	Section 4(6) ULOE				
Type of Filing: ⊠ New Filing □Ame	ndment					
	A. BASIC IDENTIFICATION DATA					
1. Enter the information requested about the	issuer					
Name of Issuer ( check if this is an amer	ndment and name has changed, and indicate chang	ge.)				
Not Your Average Joe's, Inc.						
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
5 Bridge Street, South Dartmouth, MA 02	2748	(508) 991-5637				
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
(if different from Executive Office)		Bo				
Address of Executive Offices (Number and Street, City, State, Zip Code)  5 Bridge Street, South Dartmouth, MA 02748  Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Office)  Brief Description of Business  Full service food and beverage establishment  Time of Diviness Operations						
Full service food and beverage establishm	nent	ESSEN				
		JUL 10 200				
Type of Business Organization	_	2004				
orporation	limited partnership, already formed	other (please specifical)				
business trust	limited partnership, to be formed	"awcial B				
	Month Year					
Actual or Estimated Date of Incorporation of		Actual Estimated				
Jurisdiction of incorporation of Organizatio	on: (Enter two-letter U.S. Postal Service abbreviat	117 112 1				
	CN for Canada; FN for other foreign jurisdict	1011)				

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to file: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fees as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with the state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer Director General and/or Check box(es) that Apply: □ Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Silverstein, Stephen Business or Residence Address (Number and Street, City, State, Zip Code) 5 Bridge Street, South Dartmouth, MA 02748 Check box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Silverstein, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) 130 Clarendon Street, North Dartmouth, MA 02747 Executive Officer General and/or Check box(es) that Apply: Promoter Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Whelan, William Business or Residence Address (Number and Street, City, State, Zip Code) 39 Turner Street, New Bedford, MA 02740 Executive Officer Director General and/or Beneficial Owner Check box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) O'Donnell, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) c/o Boston Concessions Group, 111 Sixth Street, Cambridge, MA 02141 Promoter Beneficial Owner Executive Officer Director General and/or Check box(es) that Apply: Managing Partner

Executive Officer

□ Director

General and/or

Managing Partner

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

6 Ann Vinal Road, Scituate, MA 02066

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Promoter

Beneficial Owner

c/o Grace Associates, SunTrust Center, Suite 1850, 200 South Orange Avenue, Orlando, FL 32801

Strobino, Jamie

Grace, Edward P.

Check box(es) that Apply:

Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last hame first Karp, Stephen R.	, if individual)				ı
Business or Residence Addi c/o New England Develop	,	and Street, City, State, Zip ls Avenue, Newton, MA 0	,		
Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first Stone, Jeffrey S.	, if individual)				
Business or Residence Addr 68 Ingham Way, Pembrok	•	and Street, City, State, Zip	Code)		
Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first Cusick, Ralph and Jacquelin	•				
Business or Residence Adda 4815 Fort Sumner Drive, Bo	,		Code)		
Check box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first Belmont Navy LLC	, if individual)				
Business or Residence Adda c/o Boston Concessions C		and Street, City, State, Zip Street, Cambridge, MA 0			
Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first Grace Associates	, if individual)				
Business or Residence Add: SunTrust Center, Suite 1850	•		,		
Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Innovative Productions LLC					
Business or Residence Add c/o New England Developm		and Street, City, State, Zip Avenue, Newton, MA 024			·
Check box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Bennett Cove Management	, if individual)				
Business or Residence Add Deloitte & Touch LLP, 200	•	and Street, City, State, Zipt, Boston, MA 02116.	Code)		

<u></u>											<del></del> ,	
				B. INF	ORMATI	<u>ON ABOU</u>	T OFFER	ING				
1. Has the	e issuer sol	d, or does t	he issuer in	tend to sel	l, to non-ac	credited in	vestors in tl	nis offering	?			Yes No
			Ans	wer also ir	n Appendix	, Column 2	, if filing u	nder ULOE	,			
2. What i	s the minin	num investi	ment that w	ill be accer	oted from a	ny individu	al?				\$	10,000
				•								Yes No
	-	-	nt ownershij	_								
commi a perso states,	ssion or sin on to be list list the nat	milar remun ted is an as me of the b	ested for ea neration for sociated pe oroker or de at forth the i	solicitations son or agentaler. If m	n of purcha ent of a bro ore than fi	sers in con ker or deal ve (5) pers	nection with er registere ons to be li	h sales of sed with the	ecurities in SEC and/o	the offering with a sta	ng. If ate or	
Full Name	(Last nan	ne first, if i	ndividual)		<del></del>					<del></del>		
Business	or Residence	ce Address	(Number a	nd Street,	City, State,	Zip Code)			<del></del>		·	
Name of A	Associated	Broker or I	Dealer .									
			Has Solicite								A	11 States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nan	ne first, if i	ndividual)									
Business of	or Residenc	ce Address	(Number a	nd Street,	City, State,	Zip Code)						
Name of A	Associated	Broker or I	Dealer		<del></del>							
			Ias Solicite									
(Check "	All States"	or check in	ndividual S	tates)	**************					••••••	A	ll States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nan	ne first, if i	ndividual)									
Business	or Residence	e Address	(Number a	nd Street,	City, State,	Zip Code)			<del></del>			<del></del>
Name of A	Associated	Broker or I	Dealer			<del></del>		<u> </u>				
			las Solicite ndividual S								A	ll States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	D USE OF PROCE	EEDS
	Enter the aggregate offering price of securities included in this offering and the total amount alrea "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns bel exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		_	
	Debt Equity	_	\$ 0
	• •	\$ <u>0,500,000</u>	\$ <u>6,222,664</u>
	☐ Common ☐ Preferred		0 < 000 < 4
	Convertible Securities (including warrants)		\$ 6,222,664
	Partnership Interests		\$_0
	Other (Specify)		\$ 0
	Total	\$ <u>6,500,000</u>	\$ 6,222,664
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased so their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Accredited Investors	_27	\$ 6,222,664
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering Question 1.	. Classify securities by	y type listed in Part C
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	·	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities solely to organization expenses of the issuer. The information may be given as subject to future con is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	tingencies. If the ame	
	Printing and Engraving Costs		\$_2,665
	Legal Fees	$\boxtimes$	\$_40,000
	Accounting Fees		\$ <u>0</u>
	Engineering Fees	_	\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Travel; Investment Advisory Service; Blue Sky filing fee	$\boxtimes$	\$ 66,000
	•		

\$ 108,665

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ <u>6,391,335</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	\$	□ s
	Purchase of real estate	\$	□ s
	Purchase, rental or leasing and installation of machinery and equipment	\$	□ \$
	Construction or leasing of plant buildings and facilities	\$	□ \$
	Acquisition of other businesses (including the value of securities involved in this		
	offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	<b>S</b>
	Repayment of indebtedness	\$	<b>∑</b> \$ <u>2,599,000</u>
	Working capital	\$	<b>\$</b>
	Other (specify): Costs associated with opening new restaurant locations	\$	<b>⋈</b> \$ <u>3,792,335</u>
	Column Totals	\$	<b>∑</b> \$ <u>6,391,335</u>
	Total Payments Listed (column totals added)	\$	<b>□</b> \$ <u>6,391,335</u>

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Not Your Average Joe's, Inc.	Signature	Date July 13, 2004
Name of Signer (Print or Type) Stephen Silverstein	Title of Signer (Print or Type)  President	

## **ATTENTION**

	intentional misstatements of one	issions of fact constitute federal criminal v									
	E. STATE SIGNATURE										
1.	Is any party described in 17 CFR 230.262 pt of such rule?	resently subject to any of the disqualification	<u> </u>								
	\$	See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as	•	te in which this notice is filed, a notice on								
3.	The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state administrators, upon wri	itten request, information furnished by the								
4.	The undersigned issuer represents that the is limited Offering Exemption (ULOE) of the this exemption has the burden of establishin	state in which this notice is filed and understa	be satisfied to be entitled to the Uniform ands that the issuer claiming the availability of								
	he issuer has red this notification and knows the dersigned duly authorized person.	he contents to be true and has duly caused the	is notice to be signed on its behalf by the								
	suer (Print or Type) Not Your Average Joe's, Inc.	Signature	Date July 13, 2004								
	ame of Signer (Print or Type) Stephen Silverstein	Title of Signer (Print or Type)  President	•								

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1,	•	2	3		4							
	non-ac investor	o Sell to credited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)							
State	Yes	No	Series E Convertible Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No			
AL												
AK												
AZ												
AR		X	\$6,500,000.00	1	\$100,000.25	N/A	N/A		X			
CA		· · · · · · · · · · · · · · · · · · ·										
CO												
CT												
DE	!											
DC												
FL		X	\$6,500,000.00	4	\$3,687,954.00	N/A	N/A		X			
GA		X	\$6,500,000.00	1	\$19,573.42	N/A	N/A		X			
HI												
ID					:							
IL												
IN												
IA		:										
KS												
KY												
LA												
ME												
MD		X	\$6,500,000.00	1	\$131,199	N/A	N/A		X			
MA		X	\$6,500,000.00	14	\$2,027,711.39	N/A	N/A		X			
MI		X	\$6,500,000.00	1	\$63,705.00	N/A	N/A		X			
MN			,									
MS												

## APPENDIX

1	•	2	3		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
	Intend to non-ac investor	to Sell to credited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)						
State	Yes	No	Series E Convertible Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
МО			,						
MT									
NE							·		
NV									
NH									
NJ									
NM									
NY		X	\$6,500,000.00	3	\$134,999.99	N/A	N/A		X
NC									
ND									
ОН			,						
OK									
OR		X	\$6,500,000.00	1	\$25,000.00	N/A	N/A		X
PA									
RI									
SC				_			6		
SD									
TN									
TX								-	
UT			.,						
VT									
VA							·		
WA									
WV									
WI									
WY									

# APPENDIX

1	non-ac investor	co Sell to credited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State PR	Yes	No	Series E Convertible Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	